#### **FEE TRANSMITTAL**

## Electronic Version v08

Stylesheet Version v08.0

Title of Invention

AN OPTICAL PROXIMITY CORRECTION METHOD

Application Number:

Date:

First Named Applicant: Jiunn-Ren Hwang
Attorney Docket Number: NAUP0493USA1

# **TOTAL FEE AUTHORIZED \$ 770**

Patent fees are subject to annual revisions on or about October 1st of each year.

Filing as large entity

## **BASIC FILING FEE**

Fee Description	Fee Code	Amount \$	Fee Paid \$			
Utility Filing Fee	1001	770	770			
Subtotal For Basic Filing Fees: \$ 770						

# **EXTRA CLAIM FEES**

Fee Description	Extra Claim	Fee Code	Amount \$	Fee Paid \$		
Total Claims : 8	0	1202	18	0		
Independent Claims: 1	0	1201	86	0		
Subtotal For Extra Claims Fees: \$ 0						

#### **AUTHORIZED BILLING INFORMATION**

The commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit account number: 500801

Access Code \*\*\*\*

Deposit name: NORTH AMERICA INTERNATIONAL PATENT

**OFFICE** 

Deposit authorized name: WINSTON HSU Signature: VAEB-JMXX-8IIL

Date (YYYYMMDD): 2004-04-02

Charge Assignment Fees Required Under 37 C.F.R. Section 1.21 (h).

Charge Any Additional Fee Required Under 37 C.F.R. Sections 1.16 and 1.17.